**FEC** 

Only

## STATEMENT OF

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**ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Visionary Leaders Fund PO Box 19514 ADDRESS (number and street) (Check if address is changed) 66285 KS CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS visionaryleadersfund@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.visionaryleadersfund.com (Check if address is changed) DATE 2018 C00567313 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Aaron, Trost, V.,, Type or Print Name of Treasurer Aaron, Trost, V.,, [Electronically Filed] 80 17 2018 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

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TYPE OF C	COMMITTEE e Committee:
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
Name of Candidate	
Candidate Party Affiliation	Office Sought: House Senate President  District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	
Party Com	nmittee:  (National, State (Democratic,
(d)	This committee is a committee of the committee of the committee of the committee is a committee of the commi
Political A	action Committee (PAC):
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is
	Corporation Corporation w/o Capital Stock Labor Organization
	Membership Organization Trade Association Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.
(f) <b>x</b>	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or par committee. (i.e., nonconnected committee)
	In addition, this committee is a Lobbyist/Registrant PAC.
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)
Joint Fund	draising Representative:
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political
	committees/organizations, at least one of which is an authorized committee of a federal candidate.
(b)	
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
ш	
ш	committees/organizations, none of which is an authorized committee of a federal candidate.
	committees/organizations, none of which is an authorized committee of a federal candidate.  mittees Participating in Joint Fundraiser
Com	committees/organizations, none of which is an authorized committee of a federal candidate.  Imittees Participating in Joint Fundraiser

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Write or Type Committee Name		r ago <b>c</b>
Visionary Leade	rs Fund	
	ganization, Affiliated Committee, Joint Fundraising Representative, or Le	eadership PAC Sponsor
-		Audicinip i i i o openice.
Visionary Leaders Fund	<u> </u>	
Mailing Address	PO Box 19514	
	Lenexa KS 66	5285
	CITY STATE	ZIP CODE
Dolotionobine M. Company	Organization Affiliated Committee	Londorchin DAC Spanner
Relationship: <b>x</b> Connected	Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
books and records: Identification books and records.  Aaron, Tros		
Mailing Address	10008 Rosehill Rd	
	Lenexa KS 66	6215 
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	980 3994
3. <b>Treasurer</b> : List the name and any designated agent (e.g., as	address (phone number optional) of the treasurer of the committee; and sistant treasurer).	the name and address of
Full Name Aaron, Trost of Treasurer	, V., ,	
Mailing Address	10008 Rosehill Rd	
		<u> </u>
	Lenexa   KS   66	S215
Till D. W.	CITY STATE	ZIP CODE
Title or Position Treasurer	913   Telephone number	3994

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Full Name of Designated Agent	Aaron, Trost, V., ,	
Mailing Address	10008 Rosehill Rd	
	Lenexa KS 66215 CITY STATE	ZIP CODE
Title or Position Treasurer		
Banks or Other De safety deposit boxes	<b>repositories:</b> List all banks or other depositories in which the committee deposits funds, ho es or maintains funds.	lds accounts, rents
Banks or Other De safety deposit boxes Name of Bank, Dep	es or maintains funds.	lds accounts, rents
safety deposit boxes  Name of Bank, Dep	es or maintains funds.	ds accounts, rents
safety deposit boxes  Name of Bank, Dep	es or maintains funds.  pository, etc.	ds accounts, rents
safety deposit boxes Name of Bank, Dep	es or maintains funds.  pository, etc.  U.S. Bank	ds accounts, rents
safety deposit boxes Name of Bank, Dep	es or maintains funds.  pository, etc.  U.S. Bank	ds accounts, rents
safety deposit boxes Name of Bank, Dep	es or maintains funds.  pository, etc.  U.S. Bank  8600 Shawnee Mission Pkwy	Ids accounts, rents
safety deposit boxes Name of Bank, Dep	Bes or maintains funds.  pository, etc.  U.S. Bank  8600 Shawnee Mission Pkwy  Merriam  KS 66202  CITY STATE	
Safety deposit boxes  Name of Bank, Dep  Mailing Address	Bes or maintains funds.  pository, etc.  U.S. Bank  8600 Shawnee Mission Pkwy  Merriam  KS 66202  CITY STATE	
Safety deposit boxes  Name of Bank, Dep  Mailing Address	Best or maintains funds.  pository, etc.  U.S. Bank  8600 Shawnee Mission Pkwy  Merriam  KS 66202  CITY STATE  pository, etc.	
Safety deposit boxes  Name of Bank, Dep  Mailing Address  Name of Bank, Dep	Best or maintains funds.  pository, etc.  U.S. Bank  8600 Shawnee Mission Pkwy  Merriam  KS 66202  CITY STATE  pository, etc.	
Safety deposit boxes  Name of Bank, Dep  Mailing Address  Name of Bank, Dep	Best or maintains funds.  pository, etc.  U.S. Bank  8600 Shawnee Mission Pkwy  Merriam  KS 66202  CITY STATE  pository, etc.	